

Signature & Date:___

City of Rialto Purchasing **Division**

Request for Bid

Bid Number: 06-051 (show this number on envelope) Questions regarding this Bid should be directed to Monica Gilbo at 909-820-2570

BID DUE NO LATER THAN: AUGUST 22, 2005, 6:00 P.M.							
	<u>Vendor</u>			Submit Bids To: Rialto Purchasing Division			
Name:				By Hand:	By Mail:		
Attn:				249 S. Willow Ave.	150 S. Palm Ave		
Phone:				Rialto CA 92376	Rialto CA 92376		
Fax:				By Fax: 909-820	320-2600 or 909-421-4965		
Item	Qty	Unit	Description		Unit Price	Total	
001	2	EA	LATERAL FILE CABINET WITH ROLL STORAGE, 4 DRAWER, 42"W X 53-1, HON #894LBRS				
002	4	EA	VERTICAL FILE CABINET, 25" DEEP 15"W X 52"H, 510 SERIES HON #514				
			WARRANTY: (BE SPECIFIC)				
					Subtotal		
					Tax Shipping		
					Total		
FOB Destin NOTE: If you The unders delivery point specified he DECLARAT and not a sit has not dire	nation (Delive bur proposed igned agrees hts, and time brein above m FION OF NO ham or collusectly induced	ery Address something delivery term is, if this ord is. If no date in the new to the new	count days. specified on City Purchase Order, all shippir as are not FOB Destination state exact term der is accepted within or is specified, the acceptance period is forty-unless otherwise stated on the Request for EON: The undersigned certifies (or declare) is in the interest or on behalf of any personany other bidder to put up a sham bid, or manner sought by collusion to secure to his	s hereon calendar days, to furnish five (45) days. All equipr Bid Form. under penalty of perjury n, firm, or corporation not or any other person, firm	n all items at spenent, supplies and that this quotati herein named; the or corporation to	d/or materials on is genuine hat the bidder	
DELIVERY: receipt of or	We (I) will	deliver comp therwise not	plete the above articles and/or perform ab ed and at prices and terms specified subject	ove services within	c	lays from the ed on reverse	
Printed Name & Title:							